



MISSOURI DEPARTMENT OF HEALTH AND SENIOR SERVICES  
STATE PUBLIC HEALTH LABORATORY  
BREATH ALCOHOL PROGRAM

**DATAMASTER MAINTENANCE REPORT**

**RECEIVED**

By Carol Day at 2:25 pm, Oct 17, 2014

REPORT #6

Complete this report at the time of the regular monthly preventive maintenance check (not to exceed 35 days).  
Complete this report whenever the instrument is serviced or repaired and whenever it is placed into service.  
Retain the original and send a copy within 15 days to the Breath Alcohol Program, DHSS.

DATAMASTER SN 204166	NAME OF AGENCY Missouri State Highway Patrol	DATE OF INSPECTION 10/15/2014
LOCATION OF INSTRUMENT (STREET AND CITY) Lafayette County Jail, 107 S. 11th Street		TIME OF INSPECTION 10:26 AM

**CHECKLIST:** Place a mark in the box by each item if found to be satisfactory or if operating within established limits. (Write in observed values where determined.) Unmarked items must be corrected before using instrument.

<input checked="" type="checkbox"/> DIAGNOSTIC CHECK (PRINTOUT ATTACHED)	DATE AND TIME (from printout) 10-15-2014 10:26 AM
<input checked="" type="checkbox"/> COMPUTER	<input checked="" type="checkbox"/> DETECTOR
<input checked="" type="checkbox"/> PROGRAM	<input checked="" type="checkbox"/> FILTERS
<input checked="" type="checkbox"/> HEATERS SAMPLE CHAMBER 50 °C	<input checked="" type="checkbox"/> QUARTZ STANDARD
<input checked="" type="checkbox"/> FLOW DETECTOR	<input checked="" type="checkbox"/> CALIBRATION
<input checked="" type="checkbox"/> PUMP HIGH SPEED	<input checked="" type="checkbox"/> PRINTER

☒ INDICATOR LIGHTS

☒ SIMULATOR SOLUTION SUPPLIER Guth Laboratories LOT # 13290 EXP. DATE 10/29/2015

☒ SIMULATOR TEMP (34°C ± 0.2°C) 34.0 °C SIMULATOR SN CDO5535 EXP. DATE 07/30/2015

☒ CALIBRATION CHECK - (ONLY ONE STANDARD IS TO BE USED PER MAINTENANCE REPORT)

Run three tests using a standard solution. All three tests must be within ±5% of the standard value and must have a spread of .005 or less. Mark the box corresponding to the standard solution being used. (PRINTOUT ATTACHED)

- ☒ 0.100% STANDARD - MUST READ BETWEEN 0.095% AND 0.105% INCLUSIVE  
☐ 0.080% STANDARD - MUST READ BETWEEN 0.076% AND 0.084% INCLUSIVE  
☐ 0.040% STANDARD - MUST READ BETWEEN 0.038% AND 0.042% INCLUSIVE

TEST 1 102	TEST 2 103	TEST 3 103
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☒ PERFORM R.F.I. TEST (PRINTOUT ATTACHED)

INDICATE THE NUMBER OF BREATH TESTS IN THE FOLLOWING RANGES SINCE THE LAST MAINTENANCE REPORT:  
(DO NOT INCLUDE SELF-ADMINISTERED TESTS)

REFUSALS	(0-.04) 3	(.05-.09) 0	(.10-.14) 0	(.15-.19) 0	OVER .19 0
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LIST ANY NEW PARTS AND DESCRIBE ANY ALTERATION OR MODIFICATION THAT WAS MADE TO RESTORE THE INSTRUMENT TO OPERATE SATISFACTORILY AND WITHIN ESTABLISHED LIMITS  
(USE OTHER SIDE IF NECESSARY).

**INSPECTING OFFICER**

SIGNATURE Elizabeth A. Lusk	PRINT FULL NAME Elizabeth A. Lusk
TYPE II PERMIT NUMBER/EXPIRATION DATE 240099 - 03-11-2016	TELEPHONE NUMBER (816) 622-0800

RETURN COMPLETED REPORT TO THE: Breath Alcohol Program, MO Department of Health and Senior Services, Southeast District Office  
2875 James Blvd.  
Poplar Bluff, MO 63901

Face This Side Down - This Edge In First

# BAC DataMaster Evidence Ticket

MISSOURI STATE HIGHWAY PATROL

BAC DATAMASTER SERIAL NUMBER 204166

10/15/14

10:26

--- DIAGNOSTIC CHECK ---

COMPUTER: OKAY

PROGRAM (04-07-2009): OKAY

HEATERS

SAMPLE CHAMBER: 50c

FLOW DETECTOR: OKAY

PUMP

HIGH SPEED: OKAY

DETECTOR: OKAY

FILTERS: OKAY

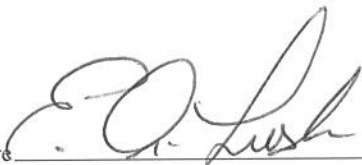
QUARTZ STANDARD: OKAY

CALIBRATION: OKAY

PRINTER TEST

!"#\$%&'()\*+,-./0123456789:;<=>?@ABCDEFGH  
IJKLMNOPQRSTUVWXYZ[\]^\_`abcdefghijklmnopqrstuvwxyz{|}~  
~

Operator Signature



Face This Side Down - This Edge In First

# BAC DataMaster Evidence Ticket

MISSOURI STATE HIGHWAY PATROL

BAC DATAMASTER SERIAL NUMBER 204166  
10/15/14

TESTING OFFICER:

LUSK/E/A

OFFICER I.D.: 588

PERMIT NUMBER: 240099

EXPIRATION DATE: 03/11/16

MISCELLANEOUS DATA:

OCT MAIN

--- SUPERVISOR MODE ---

BLANK TEST	.000	10:32
INTERNAL STANDARD	VERIFIED	10:32
EXTERNAL STANDARD	.102	10:33
BLANK TEST	.000	10:33
EXTERNAL STANDARD	.103	10:34
BLANK TEST	.000	10:34
EXTERNAL STANDARD	.103	10:35
BLANK TEST	.000	10:35

N = 3

SIM. = .1

AVG. = .1026

Operator Signature



Face This Side Down - This Edge In First

**BAC DataMaster**  
**Evidence Ticket**

MISSOURI STATE HIGHWAY PATROL

BAC DATAMASTER SERIAL NUMBER 204166  
10/15/14

ARREST TIME: 09:50

SUBJECT NAME:

DOE/JANE

DOB: 06/30/76 SEX: F

STATE/D.L.: NA/NA

ARRESTING OFFICER:

NA

OFFICER I.D.: 588

TESTING OFFICER:

LUSK/E/A

OFFICER I.D.: 588

PERMIT NUMBER: 240099

EXPIRATION DATE: 03/11/16

MISCELLANEOUS DATA:

RFI

TEST

--- BREATH ANALYSIS ---

RADIO INTERFERENCE

Operator Signature





## GUTH LABORATORIES, INC.

590 NORTH 67th STREET • HARRISBURG, PA 17111-4511 • TELEPHONE: 717-564-5470

### CERTIFICATE OF ANALYSIS

Certified Alcohol Reference Solution for Simulator

Random Samples of Lot Number **13290** of Alcohol Reference Solution for Simulator were analyzed by gas chromatography on **October 31, 2013**, using a Perkin Elmer Gas Chromatograph Autosystem XL S/N: 610N9030209, and found to contain **0.1202%** (w/vol) ethyl alcohol. The expiration date for this lot number is **October 29, 2015** at 11:59 PM.

When used in a calibrated Simulator, operating at  $34^{\circ}\text{C} \pm .2^{\circ}\text{C}$ , this solution will give a breath alcohol analysis instrument reading of **0.100 g/210L  $\pm$  3%**.

The alcohol and water used in this solution were free of test interfering substances.

Ted L. Pauley, President  
GUTH LABORATORIES, INC.

***NIST Traceability:***

*Testing was conducted using Cerilliant Reference Standard lot number FN122211-02 whose values are traceable to NIST.*

*All balances are calibrated annually by an outside agency using NIST traceable weights. Calibration verification is done prior to each use utilizing NIST traceable weights.*



STATE OF MISSOURI  
DEPARTMENT OF HEALTH AND SENIOR SERVICES  
BREATH ALCOHOL PROGRAM

2

**PERMIT  
TYPE II**

**ELIZABETH A LUSK**

is hereby authorized to instruct and supervise operators, train instructors, inspect, calibrate, perform field service and repairs, and operate the following breath analyzer(s):

**DATAMASTER, INTOX DMT**

for the determination of the alcoholic content of blood from a sample of expired air. Permit issued under the provisions of sections 577.020 through 577.041, RSMo and 306.111 through 306.119 RSMo.

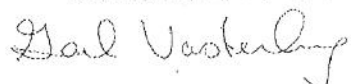
DATE 3/11/2014

NUMBER 240099

EXPIRES 3/11/2016

MO 580-0771 (6-10)

  
DIRECTOR OF STATE PUBLIC HEALTH LABORATORY

  
,acting director  
DIRECTOR OF DEPARTMENT OF HEALTH AND SENIOR SERVICES

LAB-4 (R6-10)

	STATE OF MISSOURI DEPARTMENT OF HEALTH AND SENIOR SERVICES BREATH ALCOHOL PROGRAM
<b>INSTRUMENT OPERATOR CARD</b>	
<small>The named cardholder is authorized to operate an evidential breath alcohol instrument for the determination of the alcoholic content in breath form of expired air in Missouri.</small>	
	
Operator LUSK, ELIZABETH Permit No 240099 Date Issued 3/11/2014 Date Expires 3/11/2016	